



2015 ONSITE ENTRY FORM

Event		Registration Fee	Total
Marathon	Aust & NZ	\$160	
	Other Countries	\$180	
Wheelchair Marathon	Aust & NZ	\$160	
	Other Countries	\$180	
Half Marathon	Aust & NZ	\$125	
	Other Countries	\$145	
Wheelchair 15km	Aust & NZ	\$90	
	Other Countries	\$110	
10km Run	Aust & NZ	\$90	
	Other Countries	\$110	
5.7km Run/Walk	Aust & NZ	\$75	
	Other Countries	\$95	
4km Junior Dash	Aust & NZ	\$55	
	Other Countries		
2km Junior Dash	Aust & NZ	\$55	
	Other Countries		

PERSONAL DETAILS

Email: _____

First Name: _____ Surname: _____

Date of Birth: _____ / _____ / _____ Age: _____

Gender: MALE / FEMALE

Postal Address: _____

Suburb: _____ State: _____ Postcode: _____

Country: _____

Phone: _____ Mobile: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Estimated Finish Time _____: _____: _____ (HH:MM:SS)

T-Shirt Size (Except Junior Dash) *please circle*

Size	XS	S	M	L	XL	XXL
Measurements (in cm)	42	46	50	54	58	62

INDEMNITY & RELEASE AGREEMENT

- I acknowledge that I have read and understand this Indemnity and Release and agree to be bound by it.
- I certify that if I am acting as an agent of the competitor who will be participating in the Event and in consideration of the Event Organiser accepting the competitor's application to participate in the Event, I have the authority and do grant an indemnity to the organiser on behalf of each individual competitor.
- I acknowledge that by submitting an entry application form and participating in the Event (whether one or more of the Gold Coast Airport Marathon, Wheelchair Marathon, Half Marathon, Wheelchair 15km, 10km Run, 5.7km Challenge, Junior Dash and related activities) may involve real risks including but not limited to serious injury or even death from various causes including over exertion, dehydration and accidents with other participants, spectators or road users. I voluntarily assume all risks associated with my entry application and participation in the Event or any activity associated with it. I consent to receiving any medical treatment that Event Organisers think necessary during or after the event.
- I, the undersigned, in consideration of and as a condition of acceptance of my entry in the Event for myself, my executors, administrators, heirs, next of kin, successors and assigns, release the Event Organiser, officers, its agents, affiliates, employees, members, volunteers, sponsors, promoters and any person or other body directly or indirectly associated with the Event, from all claims, demands and proceedings arising out of or in connection with my participation in the Event and I indemnify them against all liability (including acts of negligence to the fullest extent permitted by law) whatsoever and howsoever caused arising as a result of or in connection with my participation in the Event including any loss whatsoever of personal property or otherwise.
- I will abide by the Event rules and timelines, as varied from time to time and will abide by directions given by Event officials and accept the Event Organiser has discretion to accept or decline an entry on whatever grounds.
- I acknowledge that the entry fee I have paid (for myself or another person) in relation to the Event may entitle me (or that other person) to the opportunity to participate in the Event on 4 July and 5 July 2015 and to receive any entitlements upon completion of the Event
- I acknowledge that I am not (and no other person is) entitled to a refund or credit of any nature in relation to the entry fee(s) and/or ancillary items I have paid (for myself or another person), for any reason whatsoever, or in any circumstances, unless and to the extent that the Event Organiser is required to provide a refund or payment at law.
- I acknowledge that the Event Organiser is entitled to deduct administrative, legal, operational and other costs from any amount (if any) I would be entitled to receive by way of refund (if payable at law).
- I accept the Event Organiser may at their absolute discretion, limit the number of entries in an event for risk management purposes. Should my entry be received and rejected after an introduced limit has been reached, I shall be entitled to a full refund of my entry fees only and have no other claims.
- The Event Organiser stages this event to benefit the sport of athletics with the assistance of Athletics Australia (AA). The Event Organiser collects information from all participants and has agreed to provide this information to AA as a condition of entry into each event.
- I consent to my details being disclosed to parties necessary in the conduct of the event, medical officials during treatment and official charities for purposes of issuing Tax Invoices.
- I consent to the publication and/or use in any form of media whatsoever of my name, image, voice, results, statements or otherwise, without payment or compensation and agree that I will reasonably expect to receive marketing material, such as SMS, email and entry forms, from Tourism and Events Queensland and sponsors regarding its events.

INDEMNITY AND RELEASE ACCEPTANCE COMPETITORS OR THEIR AUTHORISED AGENT MUST ACCEPT AND SIGN THIS AGREEMENT

Signature: _____

Date: _____ / _____ / 2015

PARENTS/GUARDIANS ACCEPTANCE

Parent/Guardian Signature: Declaration for minors - If you are under 18 years at the time of entering the Event, this declaration MUST be accepted and signed by your parent or guardian. I certify that I am the parent/guardian of ("the minor") who will be participating on the day of the Event. In consideration of the Event Organiser accepting the minor's application to participate in the Event, I agree to indemnify and shall keep indemnified the Organisers in respect of any losses they or any of them may suffer as a consequence of any claim/s by the minor and to the same extent as any other competitor indemnifies the organisers pursuant to the Clause 1 above.

Name: _____

Signature of Parent/Guardian: _____

FUNCTIONS & EXTRAS	COST	QUANTITY
iTaB	\$12	\$
DONATIONS		
Cancer Council Queensland		\$
DISCOUNTS		
\$5 discount applies to participants who are aged 13 years or under or 65 years and over on race day (4-5 July 2015) (Not applicable for the Junior Dash)		- \$
TOTAL		\$

PLEASE TAKE THE COMPLETED FORM TO THE LATE ENTRY DESK

OFFICE USE ONLY

Attendant Name: _____

Date/Time: _____

Late Entry Race No: (incl. letter): _____

Race Transfer Race No: (incl. letter): _____
Original Entrant Name: _____
New Entrant Name: _____
 Authorisation Viewed/Attached

Race Change Downgrade Upgrade
Original Race No. (incl. letter): _____
New Race No. (incl. letter): _____
Payment Difference Required: \$ _____

Other Details: _____

Counter: HD1 HD2 LE3 LE4 Teams

Payment (if required): Payment Approved
 Cash EFTPOS (Ensure receipt/s attached)